

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X640

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishme	ent Name		1 4 4	Telephone Number	Date of In: (mm/dd/yi	
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			mber and street, city, state, zip code)	502 - 876 -16CH	$ \Psi/I3$	1/2019 18-120
366Z Owner	North	304	LCt (suik 23) New Albery, W 47150	Purpose:	Follow-u	p Release Date
Debbie Daison				1. Routine	Į.	10 days
Owner's Address				2. Follow-up	Summers	of Violations:
:				3. Complaint	Summary	of Violations.
Person in C				4. Pre-Operational	$ \mathbf{g} $	NC Z R
Debbie			<u></u>	5. Temporary		
Responsible	e Person's	E-ma		6. HACCP	Menu Ty	pe (See back of page)
Certified F	:			7. Other (list)	1 2	2 🗸
Rhbic		-	(10/8/23)] 1	3_4_3
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MADIZED 6C2	<u> </u>	
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
	•		·	MWARY OF VIOLATIONS" A	ND IN THE P	To Be Corrected By
Section#	C/NC	R	Narrative			10 ве Соггесцей ву
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430	NL	R	Observed (2) shand cailing tiles i	in lobby/hallwar	ļ	/ Mooth
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Received by	y (name an	d title	printed):	Inspected by (name and title	printed):	/2
Del	sbie		Jenison Manager	A.).	Ingra	n (EHS)
Received by (signature): Inspected by (signature):						
Deblue Denison						<u>. </u>
cc;			Denison Manager e Denison Cc:		cc:	